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CONFIRMATION NO. 3153

<b>SERIAL NUMBER</b> 09/516,983	<b>FILING OR 371(c) DATE</b> 03/01/2000 <b>RULE</b>	<b>CLASS</b> 725	<b>GROUP ART UNIT</b> 2623	<b>ATTORNEY DOCKET NO.</b> T702-02	
<b>APPLICANTS</b> Charles A. Eldering, Doylestown, PA; M. Lamine Sylla, New Britain, PA; John P. Blasko, New Hope, PA;					
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/204,888 12/03/1998 PAT 7,150,030 <i>JS</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>none JS</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 04/29/2000					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged <i>JS</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 23	<b>TOTAL CLAIMS</b> <del>52</del> 39	<b>INDEPENDENT CLAIMS</b> <del>2</del> 3
<b>ADDRESS</b> 27832					
<b>TITLE</b> Subscriber characterization system with filters					
<b>FILING FEE RECEIVED</b> 698	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		